Application Data Sheet

Application Information

Application Type:: Regular

Subject Matter:: Utility

Suggested Classification::

Suggested Group Art Unit::

Title:: METHOD FOR TREATING PAIN WITH LOXAPINE AND

AMOXAPINE

Attorney Docket Number:: 00063.01R

Request for Early Publication?:: No

Request for Non-Publication?:: No

Suggested Drawing Figure::

Total Drawing Sheets:: 2

Small Entity:: Yes

Petition included?:: No

Secrecy Order in Parent Appl.?:: No

Applicant Information

Applicant Authority type:: Inventor

Primary Citizenship Country: US

Status:: Full Capacity

Given Name:: Ron

Middle Name::

Family Name:: HALE

City of Residence:: Woodside

State or Province of Residence:: California

Country of Residence:: US

Street of mailing address:: 17085 Skyline Boulevard

City of mailing address:: Woodside

State or Province of mailing address:: CA

Postal or Zip Code of mailing address:: 94062

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Applicant Authority type:: Inventor

Primary Citizenship Country: CZ

Status:: Full Capacity

Given Name:: Patrik

Middle Name::

Family Name:: MUNZAR

City of Residence:: Belmont

State or Province of Residence:: California

Country of Residence:: US

Street of mailing address:: 2417 Hastings Drive

City of mailing address:: Belmont

State or Province of mailing address:: California

Postal or Zip Code of mailing address:: 94002

Applicant Authority type:: Inventor

Primary Citizenship Country: US

Status:: Full Capacity

Given Name:: Joshua

Middle Name:: D.

Family Name:: RABINOWITZ

City of Residence:: Mountain View

State or Province of Residence:: California

Country of Residence:: US

Street of mailing address:: 750 N. Shoreline Boulevard #98

City of mailing address:: Mountain View

State or Province of mailing address:: CA

Postal or Zip Code of mailing address:: 94043

Correspondence Information

Correspondence Customer Number:: 37485

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Name::

Elaine C. Stracker

Name::

Alexza Molecular Delivery Corporation

Street of mailing address::

1001 East Meadow Circle

City of mailing address::

Palo Alto

State or Province of mailing address::

CA

Postal or Zip Code of mailing address:: 94303

Phone number::

(650) 687-3905, (650) 687-3900

Fax Number::

(650) 687-3998

Representative Information

Representative Designation::	Registration number::	Name::
Primary	43,166	Elaine C. Stracker

Domestic Priority Information

Application::	Continuity Type:	Parent Application::	Parent Filing Date::
This application	Claims priority to	60/429,405	11/26/2002

Assignee Information

Assignee name::

Alexza Molecular Delivery Corporation

Street of mailing Address::

1001 East Meadow Circle

City of mailing address::

Palo Alto

State or Province of mailing address::

CA

Postal or Zip Code of mailing address:: 94303